

UNITED STATES DISTRICT COURT

District of FILED Massachusetts
IN CLERKS OFFICE

DEBORAH BOYD

V.

UNITED STATES DEPARTMENT OF HEALTH
AND HUMAN SERVICES, ET ALS.

2005 NOV -4 P 12:21
SUMMONS IN A CIVIL CASE

U.S. DISTRICT COURT
DISTRICT OF MASS.

CASE NUMBER:

05 - 11434 RGS

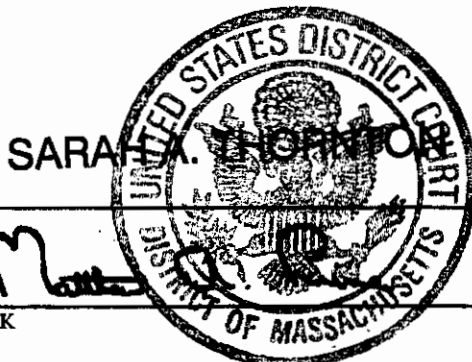
TO: (Name and address of Defendant)

YOUNG BAE KIM
330 Brookline Avenue
Boston, MA 02215

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Christopher G. Timson, Esq.
Howard, Timson & White, P.C.
89 Access Road, Suite29
P.O. Box 588
Norwood, MA 02062

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.



CLERK

(By) DEPUTY CLERK

DATE

JUL - 7 2005

AO 440 (Rev. 10/93) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me ⁽¹⁾	DATE
NAME OF SERVER (PRINT)	TITLE

Check one box below to indicate appropriate method of service

- ☐ Served personally upon the third-party defendant. Place where served: _____
- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were left: _____
- ☐ Returned unexecuted: _____
- ☐ Other (specify): _____

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
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DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on _____ Date _____ Signature of Server _____

Address of Server _____



Suffolk County Sheriff's Department • 45 Bromfield Street • Boston, MA 02108 • (617) 989-6999
Suffolk, ss.

November 4, 2005

I hereby certify and return that on 11/4/2005 at 11:17AM I served a true and attested copy of the Summons, 1st Amended Complaint and Cover Sheet in this action in the following manner: To wit, by delivering in hand to Christine Murphy, Office Manager, agent at the time of service for Young Bae Kim, MD, 330 Brookline Avenue, Beth Israel Deaconess Medical Center Boston, MA 02125. U.S. District Court Fee (\$1.00), Basic Service Fee (1H) (\$30.00), Travel (\$1.00), Postage and Handling (\$1.00). Attest/Copies (\$5.00) Total Charges \$42.00

(1)

Deputy Sheriff David B. Isberg

Deputy Sheriff

05026399